Mail or Fax a copy of this form to:

2016-21-T

Request for Cancellation of Certificate

Need Assistance with completing the Form?

SC Office of Regulatory Staff

Public Service Commission of South Carolina Clerk's Office 101 Executive Center Dr., Ste 100 Columbia, S.C. 29210	SC Office of Regulatory Staff Transportation Department
PHONE (803) 896-5100 FAX (803) 896-5199	PHONE: (803) 737-0800
DATE: 2/28/2018	*
Please consider this a request to cancel my:	
Class C Taxi Certificate	Class A Restricted Certificate
Class C Charter Certificate	
Class C Charter Bus Certificate	
Non-Emergency Certificate	RECEIVE
Class E Household Goods Certificate	RECEIVED  APR 0 2 2018
Class E Hazardous Wastes Certificate	OLERUS SC
My Certificate Number is Unknown	CLERK'S OFFICE
Custom Moving Solutions, LLC DB	
(Name of Company)	(If applicable)
27 Bernwood Drive	(F Jiffarent From Ctroot Addross)
(Street Address)	Mailing Address if different from Street Address)
Taylors, SC 29687	
(City, State, Zip Code)	(City, State, Zip Code)
(Telephone Number)	TOH HALL
	(Signature)
<u></u>	lember, LLC
	(Title) Owner, President, etc.